AR 1. PLACE OF BUTH		OARD OF HEA FAL STATISTICS FIGATE OF BIRTH	LTH State File No. 10 L
County Gila		State Arizona	
District or Township		. or Village	
	•		St., Ward give its NAME instead of street and number) If child is not yet named, make supplemental report, as directed.
3. Sex of Child To be answered ONLY in event of plural births.	4. Twin, triplet or other 5. No., in order of bir	o. Legitimar	of birth Dec. 2nd 1916 Month Day Year
8. FATHER Full name Andraes Molera		14. Full maiden name	mother Juana Romero
9. Residence (Usual place of abode) Hayden If non-resident, give place and state.		15. Residence (Usual place of abode) Hayden If non-resident, give place and state. Ti2	
10. Color or race	last birthday34.(Years)	16. Color or race	17. Age at last birthday 23 (Years)
12. Birthplace (city or place) N.80 (State or country)	delena iora Mex	18. Birthplace (city	or place) <u>Lagdalena</u> htry) Sonora Kex
13. Occupation Laborer Nature of Industry Copper Concentrator		19. Occupation Nature of Industry	Nousewife vygygygygygygygygygygygygygygygygygygyg
20. Number of children of this mother (Taken as of time of birth of child here certified and including this child.)	ein (b) Born aliv	e and now living	NO
I hereby certify that I attended the bir	th of this child, who was	Born slive or stillborn	at 3 a 30 A m .on the date above stated.
"When there was no attending phy or midwife, then the father, househ etc., should make this return. A sti child is one that neither breather shows other evidence of life after bi	liborn s nor rth.		Father (Physician or midwife.) Layden, Arizona
Given name added from a supplementi report	day, year Grant Filed	5-28 1931	Willer, Ar 12011g